

REQUEST FOR CONVOY CLEARANCE		1. CONVOY NUMBER	2. UIC WFSPAA	3. DATE(YYYYMMDD) 2001/08/18	
SECTION I - GENERAL					
4. ORGANIZATION 316th Trans Co (Lt/Mdm Trk)		5. STATION Bldg 1234, Fort Story, VA 23459		6. CONVOY COMMANDER John J. Jones 2LT	
7. PERSONNEL STRENGTH		8. POINT OF ORIGIN		9. DESTINATION	
a. OFFICER 1	b. ENLISTED 47	Fort Story, VA		Port of Charleston, SC	
10. DATE AND TIME		b. ARRIVAL	11. RATE OF MARCH		
08/28/01 0700		08/28/01 1641	45 MPH, 50 max catch-up		
SECTION II - CONVOY COMPOSITION					
12. NUMBER OF EACH TYPE OF VEHICLE AND DESCRIPTION <i>(Include towed equipment)</i> 19 ea M923 Trk Cgo D/S 5 Ton 2 ea M998 Trk Util Cgo/Tpr Carr 1 ea M96A2 Truck Tractor 6x6 towing 1 ea M870A1 Stlr Low Bed 40 Ton					
13. TOTAL NUMBER OF VEHICLES	14. NUMBER OF OVERSIZE/ OVERWEIGHT VEHICLES	15a. NO. OF SERIALS	b. TIME INTERVAL	16a. NO. OF MARCH UNITS	b. TIME INTERVAL
22	1	NA	NA	3	10
SECTION III - ROUTE DATA					
17. PROPOSED ROUTING <i>(Indicate US Routes, State Routes, etc.)</i> Ft Story to I 264 W, US 58 W, I 95 S, I 26 E, US 17 S to Port of Charleston					
18. ETA AND ETD AT STATE LINES, MAJOR ROAD JUNCTIONS, MAJOR BRIDGES AND TUNNELS, METROPOLITAN AREAS AND OVERNIGHT HALT SITES <i>(Continue on a separate sheet if additional space is required)</i>					
a. LOCATION		b. ETA	c. DATE (YYYYMMDD)	d. ETD	e. DATE(YYYYMMDD)
SP (I 264 W / US 58 W) [Fort Story]		0700	2001/08/28	0723	2001/08/28
CP1 (US 58 W / I 95 S [Emporia, VA])		0800		0828	
CP2 (I 95 S / VA - NC State Line)		1015		1038	
CP3 (I 95 S / US 421 [Dunn, NC])		1215		1338	
CP4 (I 95 S / NC - SC State Line)		1400		1423	
CP5 (I 95 S / I 26 E [Manning SC])		1600		1623	
RP (I 26 E / US 17 S [Charleston SC])		1618		1641	
SECTION IV - LOGISTICAL DATA					
19. BRIEF GENERAL DESCRIPTION OF CARGO <i>(Brief general description; i.e., organizational impediments, etc.) (Within security limitations)</i> List general description of cargo. Examples: <ul style="list-style-type: none"> • Troops with or without weapons • Any sensitive documents • Tanker filled or empty • Hazardous Cargo 					

20. ARE EXPLOSIVES TO BE TRANSPORTED?		<input checked="" type="checkbox"/> YES		<input type="checkbox"/> NO (If YES, describe below)	
a. CLASS	b. AMOUNT	c. DESCRIPTION		d. VEHICLES TO BE USED	
1.3C	60 lbs	Cartridges, for small arms, blank		(1) NO.	(2) TYPE
				1	1 1/2 ton Trk
21. STATEMENT WHY EXPLOSIVES CANNOT BE TRANSPORTED COMMERCIALY (Movements involving explosives and/or other dangerous articles are required to comply with all applicable regulations or directives) <h2 style="text-align: center;">Time constraints do not allow commercial shipping</h2>					
22. LOGISTICAL SUPPORT REQUIRED AT OVERNIGHT HALT SITES? <input type="checkbox"/> YES <input type="checkbox"/> NO (If YES, complete the following) (Use separate sheet if additional space is required)					
a. DATE (YYYYMMDD)	b. INSTALLATION	c. GAS (gals)	d. OIL (gals)	e. RATIONS	f. BILLETS
Block 22: Logistical Support Required at Overnight Halt Sites? Yes or No If yes, complete the following: a: DATE (YYYY/MM/DD) b: Installation c: Gas (gals) d: Oil (gals) e: Rations f: Billets g: Other					
23. REMARKS This block is to be used to inform the chain of command of any unique convoy requirements. <ul style="list-style-type: none"> - Planned location of fuel and meal halts. - Types of radios - Specific support requirements. - List each oversized/over weight vehicle (truck or truck trailer combinations) with load description. <p>Note: Enter name, rank, telephone and fax number of convoy point of contact (POC) during normal duty hours.</p>					
24. REQUESTING AGENCY			25. APPROVING AGENCY		
316th Trans Co			<div style="border: 2px solid black; padding: 10px; text-align: center;"> <h3>Approved through DMC (SMCC) in convoy's state of origin or ITO/ UMC</h3> </div>		
26. REQUESTED BY					
a. NAME (Last, First, Middle Initial) Chestnut Charles C.					
b. GRADE 1LT	c. TITLE Unit Movement Officer				
d. SIGNATURE Charles C. Chestnut		e. DATE (YYYYMMDD) 2001/08/18	27. APPROVED BY a. NAME (Last, First, Middle Initial) b. GRADE c. TITLE d. SIGNATURE e. DATE (YYYYMMDD)		
INSTRUCTIONS: In cases where bona-fide emergencies exist, the information contained on DD Form 1265 and DD Form 1266 may be transmitted to the appropriate headquarters by telephone or electronic transmission. In this event, reference will be made to item numbers in the sequence in which they appear on the form. Items which do not apply will be so indicated.					